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PROCEDURES FOR BUILDING COLLABORATION BETWEEN THE GOA AND NGOS UNDER THE ARMENIA SOCIAL TRANSITION PROGRAM

Prepared by
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PLANNING AND DEVELOPMENT COLLABORATIVE INTERNATIONAL
Development Solutions for the 21st Century

PREFACE

Under the Armenia Social Transition Program (AST) that PADCO is conducting under contract for USAID, PADCO is required to assess the capacity of Non Governmental Organizations (NGOs) to support the work of the AST in implementing pilot programs to test new ways of delivering health and social services to the population of Armenia. The RFP specifically asked the AST to investigate and develop ways of

“Developing alternative mechanisms for providing social services and primary health care, through strengthening local NGO and service provider capacity, and pilot testing new approaches to addressing needs.”

During the first year of the project, three pilot sites will be created – one each in Lori and Shirak Marzes and one in Yerevan City. At these sites, AST team members will support the Government of Armenia in restructuring health facilities and in developing new systems for improving the delivery of social services. In companion reports, the AST has outlined the work that will be conducted in Lori Marz and has described approaches to the testing of new appeals systems for recipients of social benefits and an integrated approach to delivering social benefits.

It is the intention of the AST to utilize – where feasible – NGOs to implement these pilot projects and to use NGOs in innovative ways to deliver social and health services. The focus of AST efforts will be to support the GOA in preparing itself to make greater use of the private sector in meeting the social and health needs of the population – through facilitating the development of both an effective legal framework and developing the necessary administrative procedures and building staff skills to encourage MOSS and MOH to contract with private entities, including NGOs, for the provision of health and social services.

This report, prepared by Thomas Carmody of Counterpart International, a member of the ASTP team, describes the procedures for collaboration between the AST and the STP program in order to ensure the effective use of Armenian NGOs under the AST. This draft is based on extensive interviews with a sample of Armenian NGOs and also discussions with the four NGOs that will be conducting programs under a parallel project funded by USAID – the Social Transition Program (STP).

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1. INTRODUCTION

1.1. THE ROLE OF NGOS IN THE AST

The Armenia Social transition Program (AST) includes a broad mandate to support the GOA reform in the areas of social insurance, social assistance, and the delivery of health services. A part of this mandate is to support the increased use of private organizations – including NGOs – in the social protection and health sectors. This role will involve support of the GOA in identifying opportunities for private sector involvement and in developing procedures for implementing competitive tenders and monitoring contract compliance in the social and health sectors. The AST – in collaboration with the international NGOs that are implementing the Social Transition Program (STP).

Non Governmental Organizations offer many advantages over governmental agencies: 1) They are not bound by such constraining rules and regulations; 2) They have flexibility in determining the population they can serve – rather than being compelled to deal with all eligible individuals or families; and 3) They have much greater flexibility in hiring staff and can use volunteers more easily than can GOA agencies.

As a member of the AST team providing advice to the Ministries of Health and Social Services to support national policy reform, Counterpart will focus its activities in two areas. First, to provide advanced, customized technical assistance to facilitate the interaction between the Ministries and the community of Armenian health and social service providers. This community can include both NGOs and private business. Secondly, Counterpart will leverage its considerable experience in the identification, transportation, management and distribution of humanitarian assistance to design pharmaceutical monitoring systems and supply much needed equipment to Armenian Primary Health Care facilities.

1.2. PRINCIPLES FOR GUIDING AST WORK IN NGO SECTOR

In all of its activities, several key themes will serve to guide AST's collaboration with NGOs.

1.2.1. *Integrating With Existing Resources*

Given the capabilities of Armenian NGOs to organize and coordinate joint development activities with the government, AST's activities will begin by building on the emerging relationship between the Armenian NGO community and the local and national government representatives of the Ministries of Health and Social Security. Organizations such as *Mission Armenia*, *Asdghik* and the *Women's Rights Center* have already proven themselves as partners of the government and are ready to broaden this relationship and share their experiences with other NGOs.

AST looks forward to leveraging the excellent work of other USAID contractors, specifically the Armenian Assembly of America's NGO Training Center and World Learning's "NGO Strengthening Program". With over 7 years experience training local NGOs, the NGO Center is an excellent resource for basic and advanced organizational development training as well as for some basic technical assistance. The World Learning program will also provide basic and advanced organizational development training for the Armenian NGO community as well as some technical assistance. The combination and regular interaction of the NGO Training Center, World Learning, AST and other contractors working with Armenian NGOs will ensure a coordinated strategy to engage NGOs in policy reform.

1.2.2. *Leveraging Regional Experience*

With successful health and social service sector reform projects and NGO technical assistance programs in neighboring Ukraine and Central Asia, AST will leverage these experiences to provide examples relevant to the Armenian setting. AST's planned activities will rely on an existing pool of regional experts and institutions that can bring direct experiences on the very similar problems facing the health and social service sector in Armenia.

1.2.3. *Build from Successful Local Social Partnerships*

Initial AST activities as well as Counterpart's interviews with Armenian NGOs engaged in the delivery of health and social service provision have revealed that the successful examples of government and NGO collaboration already exist at the local level. NGOs regularly engage marz and city officials to collaborate in the implementation of their programs. AST will raise the visibility of these successes to share with other regions and elevate to the national level.

1.2.4. Strengthen Local Training and Technical Assistance Providers

All new and different technical assistance interventions conducted by non-Armenian resources will include the goal of having an Armenian resource trained to repeat the intervention in the future. For example, AAA NGO Center trainers as well as World Learning staff will be included in all activities involving international technical assistance providers and expected to replicate the training at a future date.

1.2.5. Involvement of Legal Experts

A key player in this entire process should be the International Center for Not-for-Profit Law (ICNL). They are currently negotiating a working relationship with the AAA's NGO Center as well as World Learning. As any activity by any organization to improve the health and social service sector will include the review and drafting of legislation, ICNL's involvement will be encouraged in all discussions of policy reform.

ICNL has positioned itself as an "honest broker" between government representatives and the NGO sector. Interests do not always overlap. NGOs, for example, tend to support broad access to NGO status. The government, on the other hand, is concerned about then potential for abuse of the system – with too many businesses being granted tax exemptions. ICNL has considerable experience in assisting in drafting laws that define "public benefit" narrowly. The AST will meet with AAA, World Learning, and ICNL experts to ensure that the proposed legislative agenda meets the needs of the GOA.

1.2.6. Communication and Education Campaigns

AST recognizes the importance of the role of communications and public relations in advancing the reform of policy. It is developing an extensive but focused public education campaign for its program based on collaboration with Internews and other local entities. In local communities, NGOs can serve as the conduit between citizenry and government to convey opinion and disseminate information. AST will link its media efforts with those of World Learning and look to local organizations to conduct educational campaigns and other activities.

2. AST RELATIONSHIP WITH NGO SUPPORT PROGRAMS

AST's activities will be carefully designed to integrate with and complement those of other providers of training and technical assistance will be designed. The AST's focus on national policy reform is extended through the formulation of advanced, nationally-based, technical assistance activities designed to facilitate the dialogue between NGO and private sector health and social service providers and the government of Armenia. It is anticipated that the majority of health and social service NGOs collaborating with AST activities will be those who have previously worked with USAID's NGO capacity building programs, primarily AAA's NGO Center or World Learning's NSP. Both use established criteria to select NGOs for their training and grant programs.

As a background, the following provides a brief overview of the two most relevant programs, USAID's STP and the NSP. This is followed by suggested technical assistance interventions of the AST program.

2.1. ARMENIAN ASSEMBLY OF AMERICA NGO CENTER

The AAA NGO Center's criteria for participation its NGO Management Training Program for 4 groups of 8 health and social service NGOs are as follows:

- Registered with the Ministry of Justice
- Registered with the AAA's NGO Training and Resource Center
- Working in the field of primary healthcare
- Not previously participated in AAA NGO Center's training programs

As part of the STP, the AAA's NGO Center plans to train 4 groups of 8 health and social service NGOs from the Yerevan area over a 2-year period. The 10-week program will consist of 3-hour sessions, twice a week. Topics include human and financial resources, planning and decision making, fundraising and marketing. The Center offers six, 2-hour strategic planning individual sessions with each NGO, resulting in a 3-4 page strategic plan. Each NGO will additionally be eligible for up to \$3,000 in grant funds for organizational capacity building activities. As a follow-up to this training, the Center plans to invite various government representatives to a panel with its target NGOs as well as USAID and other member of the STP.

The Center is in the final stages of negotiating a relationship with ICNL to conduct research and analysis of relevant social and health sector legislation, provide training to NGOs in this sector, conduct seminars to identify possible changes and review the legalities of licensing the provision of social services by NGOs.

2.2. WORLD LEARNING

World Learning's NSP includes a several step process to screen NGOs prior to receiving a grant. An overview of their process is as follows:

- Onsite organizational capacity assessment
- Development of customized training plans
- Introductory workshops on NGO concepts
- Submission of "Expressions of Interest" or concept papers by NGOs
- Review committee of 10 selects best concept papers for further development
- Proposal Writing workshop
- Financial Management workshop
- Development and approval of a log frame
- Grant award

Additionally, World Learning's trained organizational assessment specialists are available, on a contractual basis, to assess NGOs outside of the World Learning program.

World Learning's "NGO Strengthening Program" plans training, technical assistance and grants for NGOs, an improved NGO law and grants for institutional development and advocacy projects. Regional offices will be opened in the south and north of the country with Vanadzor designated as the northern location. The training component of the NSP will provide basic core organizational development training as well as advanced courses in media, advocacy and lobbying. Specific to the health and social service sector, World Learning and the AAA have agreed that AAA will provide training to NGOs in Yerevan while World Learning will focus on those outside of the capital.

World Learning's partners also plan relevant technical assistance activities. MSI will conduct a comprehensive analysis of the NGO sector, including health and social service NGOs. This assessment will serve as a baseline for the project and be available to other organizations. IESC will provide 15, short-term volunteer-experts traveling to Armenia for 4-week assignments such as: association building, domestic violence, advocacy, media and organizational development. And, ICNL will lead the process of developing a NGO law as well as review and comment on related laws.

While AST anticipates working with NGOs from its pilot sites that have the support of AAA and World Learning programs as potential participants in dialogue with AST's government counterparts. AST anticipates that Armenian NGOs exhibiting the following profile will be considered participants in AST's pilot programs for improved health and social services:

- Currently working in Lori Marz, Shirak Marz, or Yerevan city.
- Clear, documented mission to address health and social service issues.
- Well-defined and documented governance structure, with a governing body and officers.
- Defined and/or engaged membership, constituency base or target communities as demonstrated by community mobilization work, membership roles, periodic assemblies, etc.
- Demonstrated ability to provide health and social services, including at least one successfully completed project with clear documentation describing their work.
- Have received funds from a donor and successfully managed the budget.
- Demonstrated fiscal integrity, including transparency and openness of financial records.
- Legally registered with the government.
- Openness and/or history of working with the Ministry of Health and/or the Ministry of Social Services.
- Openness to working with other health care providers within the PHC system.

- Demonstrated commitment to health sector reform with documented efforts to advocate and lobby for change.

Attachment 8 to this report shows a preliminary screening of some potential partners prepared by PADCO as part of the preparation of its work in Lori and Shirak Marz. AST anticipates working with other USAID contractors that have used NGOs in their work – particularly The Urban Institute in Shirak – as a source of information about NGO capacity.

2.3. EURASIA FOUNDATION

The Eurasia Foundation has been providing loans and grants to NGOs and community groups in Armenia since 1994. Specific to Shirak and Lori, its Gyumri office has been open since 1997. Since beginning its programs in Shirak Marz, Eurasia has given 31 grants to:

- Small businesses
- Local government promotion of transparency
- Civil society organizations –NGOs and the media – to promote legislative improvements

Through its grant program for civil society organizations, Eurasia is developing a network of community centers around the Marz. These centers will be positioned to serve as information centers liaising between local government and the public.

2.4. MINISTRIES OF HEALTH AND SOCIAL SECURITY, MARZ ADMINISTRATIONS AND ARMENIAN NGOS

The Ministry of Health interacts with Armenian NGOs through its Department of New Projects. Following a governmental decree 2 years ago, international and Armenian NGOs that want to conduct activities in the health sector must submit their proposal to the Department for its review and approval. Approval by the Department establishes if the project can be classified as “humanitarian assistance”, thereby providing the NGO with tax-exempt status. Additionally, if the NGO’s proposal includes the provision of medical services, the staff of the NGO must be licensed.

For the last 5 months, the Ministry has been using a standardized questionnaire to collect information on the NGO as well as the project and assess the merits of the proposal. Over this period, 30 projects have been assessed and approved, 20 from international NGOs and 10 from Armenian NGOs. While the Ministry continues to accept proposals and assess each on its merits, it also is aware of the possible conflict of legislation governing the provision of medical services by NGOs and the private sector. The Ministry’s staff, for example, would like more clarification governing the provision of medical services by unlicensed facilities employing licensed health professionals.

The Lori Marz government administration’s Foreign Relations Department maintains regular contact with international and Armenian NGOs working in its region, using a list of provided by the AAA’s NGO Training Center. As the Marz is somewhat skeptical of the activity of all 126 NGOs listed, it is contacting each to confirm their contact information and current activities.

While the Department expresses its influence in the establishing of health and social service priorities as well as provides its approval of proposed projects in the region, no documented process exists for making these decisions. Particular to selecting an NGO to implement a project, the Department identifies those NGOs qualified to conduct such activities and asks them to recommend which among them is best equipped to manage the project.

The Ministry of Social Security’s primary interaction with NGOs working in the social service sector is channeled through its League of NGOs, an association of NGOs formed in September 2000. The League was formed with the objective of encouraging cooperation among NGOs. 58 NGOs are members, with the majority coming from Yerevan. The League has an office within the Ministry and is governed by an executive committee of 15 NGOs, each representing a different subsector. Two chairmen share the responsibility for the day-to-day management of the League, one from the Ministry and one elected from among the NGOs. The League’s initial activity was to coordinate the review and feedback to the World Bank on a draft “poverty reduction” proposal.

During one-on-one interviews, Armenian NGOs expressed cautious optimism toward the League. The NGOs appreciate the Ministry of Social Security’s interest in their activities as well as the Ministry’s apparent recognition of NGOs as providers of social services. At the same time, the NGOs are unsure of the Ministry’s in-

tentions to control the activities of NGOs. Evidence of local government and NGOs forming social partnerships can be found in Armenia. Most examples are found at the local level in outlying areas. A typical scenario has NGOs receiving free office space for their offices and program activities from local and city government. The Shirak Marz administration invites local NGOs to use its office for meetings. In Yerevan, the Mission Armenia NGO, coordinates with the Ministry of Education to provide internships for students studying Social Work.

2.5. IMPLICATIONS FOR AST COLLABORATION WITH NGOS

With STP partners and their subcontractors committed to extensive activities in the area of NGO assessment, review of the legal framework for NGO activities, and other tasks originally included in the AST workplan, the AST plans to develop a new set of principles to guide its involvement with the NGO sector. The AST views its roles with the NGO sector as the following:

- To work closely with its GOA counterparts – particularly in MOH and MOSS – to support the clearer understanding of the GOA on the potential involvement of the NGO sector in the private delivery of health care and social services.
- To identify the legal and regulatory barriers that prevent the national and local governments of Armenia from effectively contracting out for services to private entities (that may include NGOs). An area that the AST will review quickly will be the implications of the Government Procurement Law and the newly-formed Government Procurement Agency in facilitating or impeding contracting out for social and health services. In view of the potential involvement of ICNL in reviewing the NGO law, the AST will not be responsible directly with this task but AST legal advisors will meet and work with the AAA and ICNL to discuss the latter's findings on the law.
- To identify “market opportunities” for NGOs to be involved in contracting out services and to leverage resources available through the STP and other USAID programs of NGO support to provide services – particularly in pilot project sites in Lori and Shirak Marz and in Yerevan City. The AST will communicate through the AAA and other STP team members about these market opportunities so that, wherever possible, the STP can include potential NGO participants in training and technical support activities sponsored by the STP.
- To identify opportunities where NGOs may be able to support directly AST program efforts (in, for example, public outreach and public education in pilot sites) and to develop workplans in collaboration with only two meetings conducted to date, few activities have been conducted.

3. POTENTIAL COLLABORATIVE ACTIVITIES

Building from AST's focus of national policy reform, the AST project proposes to investigate the feasibility of the following types of collaborative activities with NGOs.

3.1. SOCIAL PARTNERSHIP CONFERENCE

AST proposes to conduct – in collaboration with the STP -- an initial conference to collect stakeholders and develop a “vision” of the health and social service sector. This initial conference will include the creation of working groups to elaborate and clarify specific topics. Key attendees will come from the following groups:

- Lori, Shirak and Yerevan community leaders
- International donors – UNICEF, WHO
- Humanitarian aid organizations
- Ministry of Health and Ministry of Social Security
- Private sector health and social service providers
- School directors and principals
- Department of Social Work, Yerevan State University
- NGOs

Additionally, representatives of the Church of Armenia would be invited as observers. The proposed agenda will include:

- Keynote speech and Introductions
- Examples of health and social service reforms in Ukraine and Kyrgyzstan
- “Social Contracting” model
 - AAA NGO Center and ICNL
 - MOSS’ League of NGOs
- Identifying existing models in Armenia
 - Case studies of successful government/NGO collaboration
- Stakeholder breakout sessions -- “Building the vision”
 - Definition of roles and responsibilities
 - Identifying gaps in health and social service provision
 - “Market opportunities” for NGOs and private sector providers
 - Training and technical assistance needs of NGOs and private sector providers
- Creation of working groups to address ongoing issues
 - Social Contracting
 - Definition of roles and responsibilities
 - Lori and Shirak Marz groups

The stakeholder breakout sessions will allow key constituencies to, working with a facilitator, reach consensus on issues important to them and present these issues to the other stakeholder groups. The working groups, elaborated in more detail below, will begin to build linkages between the Ministries and the various stakeholders while creating a forum for additional discussion on important issues.

The first Partners Conference is tentatively scheduled for July 2001, timed to follow initial activities and accomplishments in the outlying pilot site areas. AST plans on extensive collaboration with other organizations, particularly AAA’s NGO Center and World Learning’s project, to identify key NGOs and facilitators of working groups and breakout sessions.

The Partners Conference will be repeated annually to create a forum for AST and the two ministries to continually refine the vision for the evolution of the health and social service sector and to influence and shape the design of the many programs who will both directly and indirectly support this sector. A report on a similar conference conducted by Counterpart in Kyrgyzstan is included as an attachment to this report.

3.2. GOVERNMENT/NGO STUDY TOUR

In collaboration with AED and the STP team members, the AST program will explore opportunities for organizing trips for groups of government and NGO representatives to visit neighboring countries where examples of successful of government/NGO collaboration exist. For example, Counterpart’s Ukraine program, “Counterpart Alliance for Partnership”, as well as their “Phase III” program in Central Asia, contain many models of NGO collaboration with government in the provision of social service and health provision. AST recognizes that it is important that only NGOs that are ready to learn from models in other countries and that have demonstrated the capacity for sustained development would be ready to participate in such study tours. This may require waiting until the third year of the project if such tours are to be organized.

Local Counterpart offices can facilitate meetings with NGOs experienced in social partnerships with government. The AAA NGO Training Center and World Learning will assist with the identification of Armenian NGOs using their organizational assessment techniques. A more detailed proposal for an initial study tour to Ukraine is included as an attachment to this report.

3.3. WORKING GROUPS

A key outcome of the Social Partnership Conference will be the formation of working groups to discuss and solve key issues impacting policy reform in the health and social service sector. These working groups, composed of a cross-section of community leaders, NGOs, local and national government, private sector providers and other organizations will also create a forum to foster dialogue and interaction between the various stakeholders.

Additionally, AST will look for existing working groups in related fields to offer them technical assistance as needed. For example, Catholic Relief Services facilitates a working group that is focused on social justice issues.

AST will facilitate and encourage these working groups by:

- Providing space and facilitation services
- Identifying needed training and technical assistance
- Identifying needed resources and local experts such as ICNL, WHO and UNICEF
- Soliciting the involvement of the government, both national ministries and within the Marz
- Integrating the working group activities in implementation of “pilot programs” in AST programs

AST looks forward to extensive collaboration with other training and technical assistance providers to link these working groups to relevant programs. For example, World Learning and the NGO Center’s trainers will be invited to provide periodic training modules to stimulate the process. Similarly, World Learning’s technical assistance activities targeting coalition-building activities will also be invited to share their expertise as needed.

While the Social Partnership Conference will define the specific working groups created, possible examples of groups are:

- **Identification of Social Service Needs** – All government and NGOs contacted noted a lack of a process to identify and prioritize the health and social service needs of Armenian communities. With communities and the government appreciative of any and all programs, the concern exists that the most important needs may not be addressed. Both the government and NGOs expressed an interest in developing a process within the government to work with communities and NGOs identify needs and issues tenders to solicit the best possible provider.
- **Working with the Media** – AST already recognizes the importance of involving the Armenia media to educate and spread the message of national policy reform and has included a significant component in its activities. Similarly, a working group of key stakeholders could be formed to:
 - Solicit the involvement and education of journalist to these issues
 - promote publications/videos on social partnership-related issues
 - involve education-related NGOs in covering social partnership issues
 - attract, utilize and integrate resources in the Caucasus region
- **Small Business Development** –AST and Counterpart’s initial research indicates modest activity in the provision of health and social service by the private sector as well as little interaction between the private sector and NGOs. A working group could be formed to promote cooperation among business, NGOs and the government.

3.4. PILOT PROGRAMS INVOLVING CONTRACTING FOR SOCIAL AND HEALTH SERVICES DELIVERY IN PILOT SITES

As activities in AST’s pilot sites are developed, the AST program will identify unmet services needs as well as opportunities for “contracting out” for services related to pilot site activities to the private sector. Lori Marz has already been selected and approved by both MOH and MOSS as a pilot site. Additional AST pilot sites are anticipated in Shirak Marz and the City of Yerevan. The pilot site activities in which private entities (including NGOs) may be involved will be identified in collaboration with the STP so that NGOs receiving assessment and training may be able to participate in these “contracted out” services with the financial and technical support of the STP and other USAID-supported activities. AST’s role with NGOs would be only to facilitate such contracting by its state and local government counterparts or as the purchaser of services. The AST would not be involved in any direct training or capacity building with the NGOs themselves.

At the same time, the AST will coordinate the planning for these pilot programs to ensure that NGOs that could potentially participate have received the necessary training and may receive the necessary material and technical support to participate.

The type of pilot program activities in which NGOs may be involved might include (but not be limited to) the following:

- **Prevention and Treatment of Family Abuse** -- In a survey conducted by the Women's Rights center, 89 percent of surveyed families reported problems with abuse in families. Through WINROCK, the US State Department is supporting the Women's Rights center to develop programs to provide counseling and assistance to prevent or deal with cases of family abuse. The AST will negotiate with the STP to develop a plan for the possible creation of a pilot program that would be linked to the pilot projects in Lori or Shirak Marz or Yerevan City.
- **Social Service and Health Surveys** – Social service and health programs in Armenia are typically designed without the benefit of accurate and timely research to identify and prioritize the most critical needs. This kind of information would greatly assist the government to, not only identify needs, but also allocate its scarce resources and assist donors in targeting their assistance programs. At the same time, Armenian NGOs are undertaking such tasks themselves. The Yerevan-based NGO, Astghik, for example, is currently conducting a door-to-door survey of 8000 families to assess the care and services available to disabled children. This excellent example could be assisted by AST staff integrating and educating the government and other NGOs into the process.
- **Orphanages and Ambulatory Services** – The same NGO, Astghik, submitted a proposal to the Ministry of Social Security, requesting the authority to open an orphanage. While the proposal was rejected, Astghik is continuing to negotiate a more modest version to open an out-patient service within the government-run orphanage. AST will work with the Ministry to identify obstacles to an NGO operating such a facility and create an environment to experiment with the model on a pilot basis.
- **Case Studies** -- Based on the experiences in the pilot sites, AST will ensure the documentation and publication of "best practices" of NGO and private sector health and social service providers working collaboratively with government counterparts at the local level. These studies could be developed by NGOs or university students, with oversight from AST staff. Written as an ongoing series in both English and Armenian, these case studies would make an excellent training tool for both NGOs and government representatives.

As the activities of AST's pilot sites are defined with greater clarity, AST will share its workplans with STP members in order to allow coordination with

3.5. OUTREACH ACTIVITIES

An important element of AST's social service pilot activities is to assist local social services offices as well as health care PHCs to develop more effective systems for reaching vulnerable and in need individuals and families. AST will assist its state and local government partners to test alternative outreach programs – public education, home visits, town hall meetings, posters and other techniques. Private entities (including NGOs) may play a part in testing or implementing outreach programs. In collaboration with AAA and World Learning, the AST team will facilitate meetings of government counterparts with potential private sector participants to identify ways in which the latter could support the government in its programs. Types of support may include:

- **Informal Discussion Groups** – As AST's activities begin in Lori and Shirak Marz, AST staff will bring together NGOs, community leaders, government representatives, media representatives and international organizations working in the region to the initial priorities for project activities and begin the formation of relationships. These group discussions will be facilitated by AST staff, with assistance provided on an as needed basis from other training and technical assistance providers.
- **Public Education** -- An important part of the AST is raising awareness of the general public on health and social service reforms. Suitable NGOs might be identified for participation in public education activities. Supported by training by World Learning on conducting public education campaigns, public outreach, conducting TV and radio programs, and with technical assistance from AST, the government may choose to use NGOs to develop and distribute informational materials, facilitate seminars for regional and local opinion leaders, organize community meetings to explain proposed reforms, etc. These public education campaigns could also explain how needy groups can access programs, providing assistance in distributing and collecting application forms, and appeal decisions.
- **Issue-Based Coalitions** -- The AST could facilitate seminars between groups of NGOs that have formed issue-based coalitions around common concerns and government ministries as needed.

Groups of NGOs will attract a greater response from government ministries than an individual organization.

- **Information Centers** – AST will seek to engage local community groups, NGOs and private sector health and social service providers to reach out to and provide information to vulnerable population groups – particularly those in rural areas -- in need of social and health services. Examples already exist of NGOs forming “community information centers” to assist citizens to negotiate the bureaucracy of governmental health and social service systems. AST offices will assist its government counterparts to use these types of models in Lori and Shirak Marzes, by providing office space and technical assistance to entities with whom the government has expressed interest in collaborating for the delivery of such services.

3.6. SUPPORT OF A LEGAL FRAMEWORK OF NGO PARTICIPATION IN SOCIAL AND HEALTH SERVICES DELIVERY

Development of an effective legal and administrative framework that allows the government to make effective use of qualified private sector entities to deliver services requires a review of the existing laws and administrative procedures. The interests of the government as payer for services, regulator of service quality, and current supplier of services) may differ from the interests of NGOs who may want greater freedom or even preferential treatment in entering the service delivery field. AST will work with STP to ensure that these potentially conflicting interests are reconciled through open and informed debate. AST involvement may include:

- additional legal assistance from its team of Armenian health and social service lawyers
- assistance in organizing public hearings
- facilitation of working groups
- translation services
- training and orientation support to the Ministries

3.7. TRAINING AND ORIENTATION FOR GOVERNMENT ON THE EFFECTIVE USE OF PRIVATE ENTITIES

NGOs have said that constant changes within ministries results in turnover of staff that must be educated to the concept of NGOs and the role they can play in health and social service provision. NGOs specifically mention that benefits inspectors and administrators of local social services and social benefits offices as requiring training on the role of NGOs. Too often, training programs target the department heads who do not actually perform the social services. AST will address these needs with the following strategies:

- **Orientation/Training Programs** -- AST will work with training teams composed of Armenian NGOs and the AAA’s NGO Center to design and conduct orientation programs for national and local government officials on an “as needed” basis. Presentations by Armenian NGOs on the role of NGOs can be included in the agenda of AST training programs for government officials. Counterpart will contribute its training modules on the role of civil society and NGOs to assist in the curriculum design. The orientation materials will be designed to be flexible to fit into the many and varied AST training that targets government officials and will include handout material and case studies.
- **Organizational and Project Assessment** -- AST will work with providers of organizational/institutional assessment training to provide training to Ministry of Health and Ministry of Social Security staff, particularly those from the procurement departments, that are responsible for the selection and approval for health and social service providers. AST will work with existing providers of assessment training to adapt their workshops to meet the needs of government staff. Counterpart stands ready to assist with their organizational assessment experiences in the former Soviet Union, including a tool used to assess NGOs in Central Asia, Ukraine and Belarus.
- **Monitoring and Evaluation** – While monitoring and evaluation are assumed components in international aid programs and included in grant projects awarded to local NGOs, the Ministry of Social Service, responsible for the provision of services to 153,000 Armenian families lack these valuable skills. AST will work with local training and technical assistance providers to design training for the

Ministry. Additionally, Counterpart stand ready to provide the services of its Ukrainian training organization to conduct training as required.

4. PHARMACEUTICALS AND EQUIPMENT COMPONENT

4.1. PHARMACEUTICAL SUPPLY MONITORING SYSTEM

Initial interviews with the Ministry of Health, Agency for Drugs and Medical Technology, WHO, UNICEF and the Armenian Pharmaceutical Association detail considerable progress made in modernization of the pharmaceutical supply system but, the lack of a the ability to accurately track inventories of pharmaceuticals on a local and national level. This lack of information finds general shortages of key pharmaceuticals around the country as well as critical medicines available in excess quantities in some locations and unavailable in others. At the same time, the lack of an inventory control system places the burden of identifying the supply of pharmaceuticals on the patient, as they must provide the pharmaceuticals for any treatment required.

With assistance from WHO, the Agency for Drugs and Medical Technology has made progress in developing systems that meet international standards in:

- Definition of an “essential drugs list” and distribution to all hospitals and clinics
- Inclusion of the list in revised legislation and Ministry of Health policy
- Creation of a national quality control lab
- Establishment of testing/approval procedures for all imported pharmaceuticals
- Development of an initial 50 standard treatment guidelines
- Registration process for imported pharmaceuticals
- Creation of an inspection regime for local pharmaceutical manufacturers and pharmacies

The Agency has also developed a plan for the next steps in developing the pharmaceutical monitoring system. This plan will be integrated into the MOH’s overall health information systems (HIS) plan that will be developed by June 15 in collaboration with the AST and the World Bank. Once the overall HIS plan and the pharmaceutical monitoring sub-plan are developed, Counterpart’s Humanitarian Assistance Program (CHAP) Division would assist in implementing the system – in collaboration with the Agency. CHAP has experiences in several developing similar systems – including a Microsoft Access database to track the acquisition, transportation and distribution of over \$400,000,000 of humanitarian commodities, such as clothing, medical supplies, equipment and pharmaceuticals, to over 10,000 local organizations in the NIS, Africa, Europe and Southeast Asia. This total includes over 5,000 local organizations in the western NIS alone. Counterpart has already identified and assigned two of its computer database specialists in its Kiev office to the task.

If requested by the Agency and MOH, AST-Yerevan’s Senior MIS Advisor, Russell Dionne, will support implementation. He has implemented a similar system in Egypt with a nationwide pharmacy system. The system began in each pharmacy with a modest, 2-sided form to track inventories. Weekly, these forms were delivered to a regional office, where they were entered into a computer database. Diskettes containing the assembled regional information were then sent to the national level, where accurate inventories could be maintained for pharmaceuticals around the country.

Counterpart’s AST activities would be timed to immediately follow AST’s assessment of the health information sector and its definition and selection of pilot Primary Health Care clinics in Lori Marz, Shirak Marz and Yerevan city. Working with AST-Yerevan colleagues, Counterpart would identify AST PHC clinics in Yerevan city to serve as initial pilot sites. Choosing initial clinics in the Yerevan area will facilitate greater access and a more rapid development of a pilot monitoring system.

After a successful development and test phase in the two pilot clinics, Counterpart would link the 2 pilot sites to a national focal point, probably the AFDA or the Ministry of Health. Once this link has been proven, expansion to the other 180+ PHC clinics will begin.

The next steps will be as follows:

- **Counterpart Database Specialist - Armenia** -- Counterpart will nominate one of its computer database specialists from its Kiev office to elaborate the development of the pharmaceutical supply monitoring system. Timed to immediately follow MOH’s “Health Information Systems Plan”, due to

be completed 15 June, as well as AST's startup of the initial PHC clinics, Counterpart targets July 2001 for the arrival of the database specialist.

- **Database Design** – Working from the information and design developed during the field visit to Armenia, Counterpart's database specialists will begin collaboration with MOH and the Agency for drugs and Medical Technology. Through EMAIL, Counterpart staff will regularly interact with AST-Yerevan staff to finalize the database design and initial testing.
- **Pilot Site Testing** – Timed to coincide with AST's continued expansion of the network of PHC clinics, Counterpart experts will return to Armenia to install the database in the Ministry of Health and the AFDA. This visit will also include extensive hands-on training for the Armenian staff responsible for the database and selected AST-Yerevan staff by Counterpart's Russian-language database specialists.
- **Expansion of the Model** – After a carefully monitored trial, a review will be conducted by the AST staff with the PHC clinics, the Ministry of Health and the Agency for Drugs and Medical Technology to refine and improve the process. Following all necessary changes, the inventory control system will be introduced to the entire network of PHC clinics involved in the AST program through a series of training seminars for PHC staff.

4.2. MEDICAL EQUIPMENT FOR PHC CLINICS

The AST project includes plans to rehabilitate and equip Primary Health Care clinics in 3 pilot sites -- Lori and Shirak Marz and the some neighborhoods of Yerevan. This portion of the AST program will begin with approximately 60-70 PHC clinics during 2001. Two types of facilities are planned:

- **Clinical Training Facilities** – These 3-4 facilities will combine the provision of PHC services to the general public with training of PHC physicians and nurses. Two facilities are tentatively planned for Yerevan with one each in Gyumri and Vanadzor. With two objectives, these facilities will have both medical and instructional equipment on site.
- **Family Medicine Practice Centers** – These 160-180 PHC centers will be located in outlying communities in Lori and Shirak Marzes as well as targeted neighborhoods of Yerevan. Based on models developed in Kyrgyzstan to provide general services to the general public, Staffed by teams of three physicians – pediatrician, internist and obstetrician/gynecologist – functioning as a “family medicine team”. The centers will be located primarily in outlying communities in Lori and Shirak Marzes.

Lists of needed equipment have been developed for each type of facility. These lists were developed from the experience of a similar USAID project in Kyrgyzstan, now serving as a model for the AST program. The lists were further refined by reviews from American and Armenian healthcare professionals. These lists do not include disposable pharmaceutical supplies, also very much needed. These lists are attached, for reference.

The AST will develop a workplan for the provision of the necessary equipment. This will include an assessment of the equipment already available in health care facilities that may be closed under optimization programs, that have been provided by other donors and are under-utilized today. The resources provided through Carelift and Counterpart's Humanitarian Assistance Program (CHAP) Division will also be assessed to identify the lowest cost source to allow the AST program to involve and equip as many PHCs as is compatible with the orderly development of the sector.

4.3. ADDITIONAL SUGGESTIONS

In addition to the proposed activities described above, several other ideas developed during this visit that should be pursued.

- **Partnership Grant Program** – AST's facilitation of partnerships and dialogue between the government, NGOs and the private sector include many forms of advanced technical assistance but lack a funding mechanism to cover modest operating expenses for activities. AST will assist the GOA to identify potential areas for private sector involvement in social and health services. This may lead to discussions of GOA and local government counterparts with AAA and the World Learning project to provide grants to NGOs that engage in contractual relationships with state or local government agencies to provide health and social services.

- **Technical Assistance Advisory Group** – Quarterly meetings of providers of NGO training and technical assistance, specifically the health and social service sector, with GOA and local government counterparts to identify gaps in the provision of technical assistance and suggest solutions. AST could facilitate these meetings if required.

5. MANAGEMENT PLAN

5.1. FIELD BASED MANAGEMENT

Counterpart will be represented by a local-hire Program Coordinator, based in the AST-Yerevan office. The Program Coordinator will report to the AST Chief-of-Party, through the Community Projects Coordinator for day-to-day operational management activities. Counterpart-Washington, in coordination with AST's Chief-of-Party, will provide strategic direction. (A job description is attached as well as an initial workplan.)

This document will serve as the initial workplan for Counterpart's activities. Following the processes already in place in the AST project, Counterpart-Washington and the AST management team will review this workplan and ensure that any required changes as needed to address the dynamic and evolving project.

5.2. COUNTERPART HEADQUARTERS

Counterpart headquarters will backstop this project as all others funded by USAID. There will be a Program Officer and an Administrative Assistant responsible for monitoring field activities by reviewing and finalizing all reports, giving timely feedback to the field as it relates to implementation of workplans, as well as facilitation of partnerships as required. The Program Coordinator in Yerevan will be accountable to the Director of Civil Society Programs.

Headquarter's monitoring trips will be designed as part of the periodic visits of Counterpart's short-term consultants to the AST project.

5.3. MONITORING TRIPS

Counterpart's program monitoring and evaluation plan is structured to respond to the information needs of project managers and to assist them in managing for results through access to useful, timely, cost-effective and transparent management information. For Counterpart, M&E is an on-going process that serves to assess performance and progress; measure achievements against objectives; aid decision-making and timely interventions; and to inform USAID of program effectiveness.

A summary of project activities will be presented in monthly reports that are compiled by the field-based Program Coordinator and finalized by the headquarters staff. These will be submitted to AST management in a timely manner. The monthly report will provide specific updates on the following:

- **Impact Statements.** To more fully understand how project assistance is affecting project objectives, the Program Coordinator will write impact statements each month. These one-paragraph examples document how organizations have been able to use AST's assistance to achieve real results that further the program's objectives.
- **Quarterly Work Plan.** Counterpart will monitor its success in carrying out the workplan activities for the previous quarter as part of its on-going project management and makes any necessary changes in the workplan for the upcoming quarter.

ATTACHMENT 1: COUNTERPART-YEREVAN PROGRAM COORDINATOR JOB DESCRIPTION

1.1. GENERAL SUMMARY

The Program Coordinator serves as the local representative of Counterpart International for AST activities in Armenia. Located in the AST-Yerevan office and reporting directly to AST-PADCO management, the Program Coordinator serves as the primary liaison to GOA and local government agencies on NGO and private contracting issues, as support to the development of linkages between the local governments and NGOs in pilot sites, and in coordination with STP implementing organizations.

1.2. DUTIES AND RESPONSIBILITIES

1. Support to GOA counterparts in the design and development of “contracting out” strategies.
2. Facilitates the identification and assessment of health and social service NGO and private sector providers for activities in AST pilot sites.
3. In collaboration with AAA, maintains updated information on AST community of NGOs and other private sector providers of health and social services. Provides monthly summaries and shares information as requested.
4. Coordinates and assists with local, regional and national technical assistance project activities.
5. At the request of Dean Millslagle, travels regularly to Lori and Shirak pilot sites to meet with Pilot Program manager, local government counterparts and NGOs to identify issues to be addressed in developing relationships.
6. Interacts with other Counterpart programs in Armenia and the region. Provides linkages between these activities and the AST program as required.
7. Working with the AST-Yerevan team, coordinates visits of short-term Counterpart staff and experts.
8. Promotes and coordinates the exchange of information and expertise among GOA officials and STP implementers on health and social services issues – nationally and locally.
9. Submits monthly activity reports to AST-PADCO management and Counterpart DC.
10. Identifies and writes impact stories for USAID.
11. Provides interpretation and translation services as required.
12. Other duties and responsibilities as assigned.

1.3. REQUIRED KNOWLEDGE, SKILLS, AND ABILITIES

1. Advanced degree.
2. Minimum of three years’ work experience with at least one year’s experience working with state or local government on community issues.
3. Knowledge of the issues, objectives and activities of the health and NGO sector.
4. Facilitation, training and/or consulting experience required.
5. Excellent Armenian and English communication skills: speaking, writing and listening.
6. Ability to set priorities and manage time effectively.
7. Ability to work both independently and as an effective team member.
8. Computer and Internet skills; specifically Email, Microsoft Word and Excel.
9. Willingness to enhance knowledge through training and personal initiative.

ATTACHMENT 2: COUNTERPART-YEREVAN PROGRAM COORDINATOR WORKPLAN

2.1. MARCH

1. Meet/interview all senior program staff of AST program.
2. Meet MOSS and MOH departments responsible for collaboration with private service delivery organizations.
3. Accompany AST staff on site visits to Lori and Shirak Marzes. Meet AST personnel and local government counterparts, and meet with local NGOs.
4. Prepare a 1-2 page introductory document of AST's activities specific to working state and with local government counterparts on health and social services as it relates to increasing private sector involvement. Review with AST-Yerevan, finalize and translate in Armenian.
5. Conduct introductory meetings with all NGO training and technical assistance providers in Yerevan, both USAID and non-USAID contractors. Write up 1-page overview of each program.
6. Read related Counterpart project documents from similar programs in neighboring countries. Prepare 1-page overviews of each. Finalize and translate into Armenian.
7. Meet with Armenian Assembly of America's NGO Center and review their database of health and social service NGOs. Develop procedure for sharing AST information with AAA on database maintenance.
8. Travel to Ukraine for a 1-2 week orientation program. Meet with Counterpart programs – CAP, CHAP – and PADCO programs. Attend training in civil society strategies and group facilitation skills.

2.2. APRIL

1. Identify GOA priorities for improvements in legal and administrative systems for contracting out social and health services.
2. Under the guidance of the AST-Yerevan staff, assist in the preparation of an informal working group meeting in Vanadzor of government representatives, NGOs, and community leaders.
3. Identify 2-3 “best examples” of collaboration between Armenian NGOs and local government in the health and social service sector. Visit each for 1-2 days and summarize findings.
4. Attend World Learning's organizational assessment training.

2.3. MAY

1. In collaboration with STP implementers, begin preparations for Partners Conference in July.

2.4. ON GOING ACTIVITIES

1. Attend all information and coordination meetings of NGO training and technical assistance providers, both USAID-funded programs as well as others.
2. Submit weekly activity reports to AST-Yerevan management and Counterpart DC.
3. Submit 1 USAID “impact story” to Counterpart-DC per week.

ATTACHMENT 3: PROPOSAL FOR GOA & NGO UKRAINIAN STUDY TOUR

3.1. PROPOSAL SUMMARY

AST proposes sending a study group of 20 Armenian NGO and Ministry of Health and Social Security representatives from Lori and Shirak Marzes and Yerevan city to Ukraine for approximately 2 weeks to:

- observe examples of local and national government and NGOs collaborating through “social contracting” in the delivery of health and social services;
- gain a familiarization of the legislative review and drafting process used by NGOs and government officials to create a framework for provision of health and social services by NGOs and the private sector; and,
- receive an overview of recent USAID-funded reforms within the Ministry of Labor and Social Policy and the Pension Fund of Ukraine.

3.2. BACKGROUND

“Social Contracting” is a mechanism that enables the government to enter into an agreement with a third person in order to solve a social problem. The limited resources of the governments of the former Soviet Union have severely affected the provision of social services. At the same time, other dramatic changes have governments struggling to deal with issues such as unemployment, homelessness and drug addiction. In the meantime, NGOs have been the main social providers addressing these problems so far.

In Odessa, Ukraine, city government set a significant example with the adoption of the “Regulation on Social Contracting” on August 10, 2000. The first tender took place in the beginning of 2001 and the city has already prioritized the social problems to be addressed during the first contest. These include: the homeless, orphans, AIDS, and retired persons.

The regulation includes mechanisms ensuring that the selection of entities to be contracted by the city be fully fair and transparent. Co-funding requirements will enable the provisions of such social services at a lower cost for the city. Odessa will finance programs of social providers, enable the development social services provision and answer social needs that need immediate attention.

The example of Odessa is now followed in many other regions of Ukraine. During a “Social Contracting” conference in Odessa in September 2000, organized by Counterpart and the International Center for Not-for-Profit Law, more than 10 Ukrainian regions were introduced to the Odessa model. Since then the cities of Kharkiv and Kyiv as well as the Donetsk region have started a process for adopting such regulation.

Additionally, ICNL has been assisting a drafting group working on a law on social contracting. The adoption of such law would enable the central government as well as local governments to solve social issues. National budget lines could be allocated to social contracting. Consequently, the central government could, not only address national social problems, but also assist governments of small towns with very limited budgets to address their social problems.

Since 1997, the “Counterpart Alliance for Partnership” has supporting social service and advocacy NGOs in Ukraine and Belarus with the following goals:

- To develop and strengthen the institutional capacity of indigenous democratic social service and advocacy NGOs
- To develop and strengthen NGO’s advocacy skills and effectiveness
- To improve the legal regulatory environment for NGOs

Counterpart and its implementing partners, including ICNL, has strengthened the Ukraine NGO sector through a variety of interventions:

- Seed grants
- Training
- Technical Assistance
- Information and referral systems

- Legal consultations
- Legal support
- Participation of drafting legislation

Since the inception of the program, Counterpart has provided grants to over 150 social service NGOs working with the disabled, elderly, vulnerable families, substance abuse, HIV/AIDs, children and youth around Ukraine.

Another key USAID program in Ukraine is PADCO's project to support reform of social protection systems in Ukraine. Working with the Ministry of Labor and Social Policy, the Pension Fund of Ukraine, the State Committee of Statistics, USAID's "Program to Support Social Sector Reform" in Ukraine has:

- laid the foundations for pension reform;
- created a system of targeted social assistance to help the poorest Ukrainians; and,
- improved systems for reporting economic and social statistics and measuring poverty.

Before USAID's social sector reform project began in 1994, the government's program of raising tariffs for housing and services had created serious problems for the poorest families. Less than one year after PADCO started its activities, one million families were receiving assistance through the program. Today, in the winter months, more than 4 million of the most needy families – many children, invalids and pensioners -- receive assistance through the program.

Since 1998, PADCO has worked with the Ministry of Labor and Social Policy and the Pension Fund on pension reform. These efforts have included such activities as:

- Drafting more than 50 normative acts to support reforms;
- Working with the Ministry to improve and streamline targeted assistance programs
- Preparing and distributing press kits explaining program activities to parliamentarians, oblast executives, mayors and local officials
- Producing news programs, advertisements and documentaries about reforms
- Creating, staffing and training an Office of the Actuary in the Pension Fund

3.3. PROPOSAL

AST proposes sending a study group of 20 Armenian NGO and Ministry of Health and Social Security representatives from Lori and Shirak Marzes and Yerevan to neighboring Ukraine for approximately 2 weeks. The group will be accommodated by three AST-Yerevan staff members – one each from the Lori and Shirak Marz office and the third being the Program Coordinator of NGO Activities.

The group will be selected by identifying key decision makers and health and social service providers from the community of AST's various activities in their pilot sites. NGOs will be invited to "nominate" government representatives whom they consider important in building social contracts and government representatives will be invited to do the same with NGOs working in their regions. Resumes and background information of the nominated study tour candidates will be reviewed with USAID for their approval.

AST will specifically target those candidates possessing the following criteria:

Familiarity with and participation in the AST program

- Demonstrated commitment to policy reform
- Currently active at the community, district or Marz level in health and social service policy and/or provision of services

In Ukraine, AST will work through the local PADCO and Counterpart offices to coordinate the group. A possible itinerary would include visits to Kiev, Odessa and possibly Lviv. Study tour activities could include the following:

3.3.1. Kiev

- Roundtables with relevant ministries, NGOs, private sector, medical professionals
 - identify priority health and social service issues
 - programs to address them

- PADCO “Program to Support Social Sector Reform in Ukraine”

3.3.2. *Overview of legislative drafting processes*

- Strategies for working with the media
 - Production of news programs, advertisements and documentaries about reforms
- USAID’s Counterpart Alliance for Partnership” program
 - Discussions with public health specialist, legal team and ICNL
 - PADCO “Program to Support Social Sector Reform in Ukraine”
- Counterpart Creative Center
 - 2-day “Social Partnership” workshop
- NGO Social Service and Health Program Site Visits
 - Crimean Family Planning Association
- Other contractors in the sector -- Johns Hopkins, UNAIDs, British Council

3.3.3. *Odessa*

- Regional Roundtables with government, NGO, private sector, community leaders
- NGO Social Service and Health Program Site Visits -- substance abuse, information and referral systems

3.3.4. *Lviv*

- Regional Roundtables with government, NGO, private sector, community leaders
- NGO Social Service and Health Program Site Visits -- disabled programs

Immediately upon return to Yerevan, the study group will meet with AST staff members to review their trip and document their findings. AST staff will assist the group to prepare presentations to be shared with their colleagues. Selected members of the group will be invited to give short presentations at various AST training sessions with the Ministries of Health and Social Security as well as for assembled groups at AST’s offices in Lori and Shirak Marz.

3.4. **COLLABORATION WITH OTHER USAID CONTRACTORS**

As all of AST’s activities that encourage partnership between the government and NGOs and private sector social service and health providers, this proposed study tour began with consultation with other USAID contractors engaged in the same sector. Specifically, the Armenian Assembly of America’s NGO Training Center in Yerevan and World Learning’s, “NGO Strengthening Program”, were consulted during the design of the tour.

These two organizations will again be consulted during the process of identifying government and NGO representatives to ensure the best candidates are selected. Upon return from the tour, AST will meet with the NGO Training Center and World Learning to discuss application of these experiences in training and technical assistance activities in the sector. Tour participants, for example, could be included in NGO Center and World Learning programs to share their social contracting experiences.

In Ukraine, AST will leverage their relationships with their PADCO and Counterpart offices to provide key components in the program as well as logistical coordination. Counterpart’s Ukrainian partner, the Counterpart Creative Center, a local NGO training center, will be invited to coordinate the visit as well conduct shortened versions of its social contracting training modules.

The International Center for Not-for-Profit Law, with representation in Ukraine and Armenia, will also be a key contributor to the study tour, both during the actual tour and following the return of the participants to Armenia. Having led the review and drafting of social contracting legislation in Ukraine and, in the process of forming a relationship with the NGO Training Center in Armenia to do the same, ICNL will be consulted during all phases of the program.

3.5. BUDGET

| <i>Airtravel</i> | | | | | |
|--------------------------------|---|-----------------|---|-----------|---------|
| \$300RT air tickets | x | 23 participants | | | \$6900 |
| <i>Perdiem/Hotel</i> | | | | | |
| \$25/day per diem | x | 23 participants | x | 14 days | \$8050 |
| \$50/day hotel | x | 23 participants | x | 14 nights | \$16100 |
| <i>Training Materials</i> | | | | | |
| \$25/participant | x | 23 participants | | | \$575 |
| <i>Ukraine Internal Travel</i> | | | | | |
| \$150RT air tickets | x | 23 participants | | | \$3450 |
| \$150RT air tickets | x | 23 participants | | | \$3450 |
| \$125/day/minibus | x | 3 mini-buses | x | 14 days | \$5250 |
| Totals | | | | | \$43755 |

ATTACHMENT 4: SOCIAL CONTRACTING IN UKRAINE

“Social Contracting” is a mechanism that enables the government to enter into an agreement with a third person in order to solve a social problem. The limited resources of the States in countries in transition have considerably affected the provision of social services the state used to provide. In addition, a social crisis came along with the economic crisis. These states are now confronted to situations new to them. They do not know how to cope with issues such as unemployment, homelessness, drug addiction... In the meantime, NGOs have been the main social providers addressing these problems so far.

States need to resume their responsibility in ensuring the provision of social services. As a result, “Social Contracting” has become a hot topic in the region. In Ukraine, the city of Odessa has set the path in adopting the Regulation on Social Contracting on August 10, 2000.

The city of Odessa has not wasted time in the implementation of the regulation that proves the real need for such mechanisms. The first tender will take place at the beginning of the year 2001 and the city has already prioritized the social problems to be addressed during the first contest. These include: the homeless, orphans, AIDS, and retired persons.

Mechanisms provided for in the regulation will guaranty that the selection of entities to be contracted by the city be fully fair and transparent. Co-funding requirements will enable the provisions of such social services at a lower cost for the city. Finally, the city of Odessa will, on the one hand, when financing programs of social providers, enable the development social services provision and, on the other hand, when purchasing services from social providers, answer social needs that need immediate attention.

The example of Odessa is now followed in many other regions of Ukraine. During a conference in Odessa,¹ last September, on the issue of social contracting, more than 10 Ukrainian regions were represented. Since then the cities of Kharkiv and Kyiv as well as the Donetsk region have started a process for adopting such regulation.

In addition, a drafting group is currently working on the draft law on social contracting. The adoption of such law would enable the central government as well as local governments to solve social issues. National budget lines could be allocated to social contracting. Consequently, the central government could, not only address national social problems, but also assist governments of small towns with very limited budgets to address their social problems.

The path lead by the city of Odessa is remarkable in providing the possibility for real cooperation between NGOs and governments. However, improvement of the Ukrainian legislation affecting NGOs is needed for a better implementation of social contracting. For example, co-funding requirements would be better answered if there existed better tax incentives for the development of philanthropy and if NGOs would obtain tax benefits on profits from economic activities related to their statutory purposes.

¹ For more information on the Odessa conference see: Dimitrov, Yuri “International Scientific and Technical Conference: ‘The Social Technologies’ (Odessa, Ukraine)” *IJNL*, September 2000, vol.3 n°1, Washington DC. Available online at: http://www.icnl.org/journal/vol3iss1/cr_nis.htm#UKRAINE

ATTACHMENT 5: REGIONAL CONFERENCE ON SOCIAL PARTNERSHIP, KYRGYZSTAN

ATTACHMENT 6: COUNTERPART PROJECT SUMMARIES

| NGO EXPAND PROGRAM FOR TAJIKISTAN | |
|--|---|
| FUNDING AGENCY: USAID | |
| Contracting Agency Address and Telephone Number: | Marcus Johnson, Agreement Officer USAID/CAR Regional Mission c/o American Embassy 97A Furmanov Street Almaty, Kazakhstan 480091 Telephone: (7-3272) 63 54 48 |
| Contracting Agency's Technical Representative: | Peter Downs SGDO, OST/USAID/CAR |
| Grant Number: | 119-0001-G-00-9009-00 |
| Awarded/Final Price/Cost: | USAID: \$700,000 NGO: \$1,000,000 Total: \$1,700,000 |
| Contract Award Date: | August 1, 1999 |
| Expected Delivery Schedule: | August 1, 1999 – May 31, 2001 |
| <p>PROJECT DESCRIPTION:</p> <p>In support of USAID Strategic Objectives, the purpose of the NGO Expand project is to expand the capacity of Tajikistan NGOs to deliver services that reduce human suffering. A unique feature of the NGO Expand Program is the delivery of humanitarian assistance through targeted NGOs that also supports services provided by them, thus addressing humanitarian needs while building NGO capacity.</p> <p>Working with Counterpart's Humanitarian Assistance Program (CHAP), more than \$1,000,000 worth of donated humanitarian assistance commodities are scheduled for delivery into Tajikistan. Participating NGOs are being trained in distributing and accounting for humanitarian assistance commodities.</p> <p>Counterpart Tajikistan is actively engaged in providing training, technical assistance, and financial support to build and improve the capacity of social service NGOs to provide high quality services to the most vulnerable people throughout the country.</p> <p>During the past year, Counterpart identified a target group of 23 social service delivery NGOs throughout the country and delivered high level training and other technical assistance to those NGOs. Tailor-made training and technical assistance plans were developed for the individual NGOs, employing Counterpart's TTAP tool and related needs assessment activities. Eleven of the NGOs have received financial support through grants, and are successfully implementing projects targeting widows and unemployed women, disabled children, youth and adults, agriculture projects for vulnerable families, and literacy and education programs for children.</p> <p>As a result of various trainings and technical support provided through the NGO Expand program, NGOs throughout Tajikistan are able to achieve real results, or impacts. Select program highlights include:</p> <ul style="list-style-type: none"> • The Association of Medical NGOs has created linkages with two medical NGOs in Kyrgyzstan and Uzbekistan and is working on designing a project to create a Resource Center for Medical NGOs. • The Women's Center in Kulyab helped a group of 20 women lease a two hectare parcel of land for the production of potato seeds. By the end of this two-year program, the NGO is planning to involve 80 households headed by women in the Muminabad district - enabling them to increase their monthly income. • The NGO <i>Munis</i> organized a fundraising campaign that resulted in the purchase of a seven-room building from the local government to establish a Center for Street Children. The government also contributed 11.5 hectares of land for them to use for agricultural production. The profits generated from the sales of crops will allow <i>Munis</i> to support 70 children through the Center. | |

| HEALTH NGO CAPACITY BUILDING INITIATIVE FOR CENTRAL ASIA | |
|--|---|
| FUNDING AGENCY: USAID/CAR MISSION | |
| Contracting Agency Address and Telephone Number: | Marcus Johnson, Agreement Officer USAID/CAR Regional Mission c/o American Embassy 97A Furmanov Street Almaty, Kazakhstan 480091 Telephone: (7-3272) 63 54 48 |
| Contracting Agency's Technical Representative: | Office of Social Transition USAID/CAR |
| Cooperative Agreement #: | 115-A-00-00-00034-00 |
| Awarded Price/Cost: | USAID: \$848,427 Counterpart: \$127,264 Total: \$975,692 |
| Contract Award Date: | 11/1/00 |
| Projected Final Delivery Schedule: | 10/31/02 |
| <p>PROJECT DESCRIPTION:</p> <p>Counterpart's proposed <i>Health NGO Capacity Building Initiative</i>, with the goal of facilitating the organization of the health sector community, is designed to complement and intersect with the <i>Quality Health Care Program</i> managed by Abt Associates.</p> <p>The Health NGO Capacity Building Initiative strategy complements, rather than duplicates, Abt's sector-specific assistance to health NGOs and includes the following mutually reinforcing elements:</p> <ul style="list-style-type: none"> • Participatory organizational assessment. • Needs-based and customized organizational development assistance • Participatory community appraisal and action planning • Partnership facilitation. • Networking and dialogue facilitation. <p>Integral to the program strategy is the leveraging of Counterpart's expanding region-wide network of Civil Society Support Centers (currently numbering 20)—located in the majority of priority oblasts for the <i>Quality Health Care Program</i>, in both urban and rural areas. Through this network, Counterpart can offer health NGOs access to its organizational assessment tool, customized training and technical assistance, a cadre of over 100 trainers with capacity to train in some 20 NGO capacity building modules, and skills in community outreach and mobilization, partnership facilitation, and networking.</p> | |

| COUNTERPART ALLIANCE FOR PARTNERSHIP (CAP) | |
|---|---|
| Contracting Agency Information: | United States Agency for International Development USAID/ENI/NCA/WN Ronald Reagan Building Room 5.06-158 Washington, DC 20523 Telephone: (202) 712-0141 Ukraine & Belarus |
| Contracting Agency Representative: | Bob Wallin, Washington, DC Sylvia Babus, Kyiv, Ukraine |
| Contract Award Date: | March 19, 1997 |
| Contract Amount: | Total: \$10,225,000 \$4,500,000; Extended Award: \$5,725,000 |
| Contract Schedule: | March 19, 1997 – March 18, 1999; Extended date: March 31, 2001 |
| <p>PROGRAM DESCRIPTION:</p> <p>The Counterpart Alliance for Partnership (CAP) program is designed to build the capacity of local NGOs in Ukraine and Belarus to provide social services to specific vulnerable populations: children and youth, the disabled, the elderly, and drug/alcohol addicts. Equally important, CAP supports health initiatives including HIV/AIDS prevention and reproductive health, the environment, and youth leadership initiatives, and is actively engaged at the macro and micro-levels in efforts to improve the legal and regulatory environment governing the NGO sector. Counterpart's approach is integrated and comprehensive, focusing on enabling its 300 + NGO partners to achieve financial and programmatic sustainability through a combination of training, technical assistance, and grants. CAP draws on the following key elements:</p> <p>Sector Expertise and Technical Assistance - Five sub-contractors provide their sector expertise to local NGOs through specialized technical assistance. Sub-contractors include:</p> <ul style="list-style-type: none"> • <i>Counterpart Creative Center</i>, provides local training and technical consultants; • <i>Elwyn, Inc.</i>, works with NGOs serving those with disabilities such as severe mental retardation, behavioral disorders, or physical impairments in all age groups, as well as children/youth-at-risk; • <i>Salvation Army World Service Office</i>, provides expertise to NGOs serving the elderly in community-based programs, senior centers, or nursing homes; • <i>International Center for Not-for-Profit Law</i>, helps draft laws beneficial to the NGO sector, lowers bureaucratic roadblocks, and trains NGOs on their rights; • <i>Addiction and Research Treatment Services</i> of the University of Colorado at Boulder, trains NGOs in the prevention and treatment of drug/alcohol abuse, and assists NGOs that work with individuals who have contracted HIV/AIDS through drug use. <p>Locally rooted Programmatic Presence - To extend the outreach of the program, CAP has 4 satellite offices, one each in Kharkiv (northeast), in L'viv (west), Odessa (south), and Donetsk (southeast). In addition to its sub-offices, CAP coordinates and provides training and outreach activities to local NGOs through the <i>Counterpart Creative Center</i> (CCC), a local independent Ukrainian NGO. As one of Counterpart International's affiliates, CCC's 14 trainers conduct NGO trainings in various organizational development topics, provide one-on-one consultations to NGOs, and host regional networking meetings and roundtables. In Belarus, CAP has a well-developed cadre of trainers who work with NGOs in each region of the country.</p> <p>Training - CAP provides training in Project Design, NGO Management, Financial Management, Strategic Planning, Fundraising, Advocacy, Social Partnership (developing resources with business / government), Social Enterprise (NGO managed businesses), Public Relations, Monitoring and Evaluation, and many other areas. To date, CAP has conducted over 140 training workshops in Ukraine and Belarus for over 1,800 NGOs.</p> <p>Grants - CAP offers two types of grants to NGOs to increase their service capacity and promote their long-term sustainability:</p> | |

COUNTERPART ALLIANCE FOR PARTNERSHIP (CAP)

- *Seed grants* provide support towards the implementation of programs that incorporate lessons learned in training and technical assistance. CAP has awarded over \$3.375 million in seed grants to over 300 NGOs in Ukraine and Belarus.
- *Matching Grants* provide a 100% match, up to \$5,000, on resources/funding from private businesses, government agencies, or the local community. The grant has been successful at developing philanthropic attitudes and building trust between NGOs, business, and government. CAP has awarded over \$250,000 to 50+ NGOs.

Material assistance - Through coordination with another Counterpart program, Counterpart's Humanitarian Assistance Program (CHAP), over \$5.5 million worth of material aid, including clothing and medical supplies, has been provided to CAP's NGO clients and their beneficiaries.

Networking - CAP holds NGO roundtables with participation by government officials, community leaders, and businesses. In addition to roundtables, CAP also hosts an annual conference. The most recent conferences include the "Developing Professional Skills and Building Social Partnerships" conference in October, 1999, and "Building Capacity through the Media and Information Technology" conference in October, 2000, which brought together more than 200 NGO representatives, media, government officials, and business leaders. The conferences provided the opportunity for NGOs to network and exchange information, while attending training sessions conducted by CAP's international partners and local trainers.

ATTACHMENT 7: PRELIMINARY LIST OF ARMENIAN NGOS WITH SOCIAL SECTOR EXPERIENCE

7.1. METHODOLOGY FOR PREPARING LIST

There are more than 2,500 NGOs registered in Armenia. Few are active and even fewer have demonstrated the ability to meet the type of broad public needs that will be needed in collaboration with the AST. Many NGOs have been created to reduce the burden of taxation for businesses providing social and health services to the population. Many NGOs are not run on a businesslike basis.

The challenge facing the AST is to identify those NGOs that serve a genuine public purpose and that would be capable of either assuming responsibilities from the public sector or of supplementing the work of public agencies by offering innovative and different types of public services that meet the expressed needs of the Armenian population.

There is no simple way of assessing the capacity of the 2,500 NGOs in meeting these needs. There is no “NGO Clearinghouse” that provides information about the activities of NGOs – their past records, evaluations of performance, or measures of how businesslike they are in approaching their tasks. It is hoped that the AST – in conjunction with the four winners of the RFA (United Methodist Campaign on Relief – with the Armenian Assembly, Catholic Relief, Save the Children, and CARE) – will lead to a clearer system for identifying who is doing what in the NGO sector and, as important, with what success.

Therefore, this assessment is, of necessity, a working document. It reports on what the AST has discovered so far.

The approach taken was in two stages: 1) Experts in the NGO field (including representatives from the RFA winners) were interviewed and asked to identify strong potential partners for the AST Program; and 2) E-mails were sent to a list of NGOs working in the social sector with a short questionnaire asking respondents to describe their activities and sponsors. The letter and questionnaire are shown in Attachment 1 to this report.

Based on this approach, NGOs were divided into three categories:

- 1) Those with a track record and experience that shows the potential for collaboration with the AST;
- 2) Those that expressed no interest in collaborating with the AST; and
- 3) Those that failed to respond either to telephone calls or e-mail messages and which are presumed to be inactive.

This classification is not final. The AST will continue to monitor responses and to interview experts to expand the list of potential collaborators and to provide more complete information on listed NGOs.

The AST team will continue to expand the list of potential collaborators – through expert interviews and through further communications. This will allow the expansion of the list of potential collaborators as members of the NGO community become more familiar with the work of the AST and the goals and activities to be conducted in the pilot sites.

This report, therefore, should be regarded as a work in progress. We will continue to evaluate the work of Armenia’s large population of NGOs. We will continue to add new potential collaborators and also to eliminate listed NGOs from the list of potential collaborators.

Once a final list of potential collaborators in the AST pilot programs is identified, the AST team will assess the “short list” of candidates in greater detail to identify capacity and potential roles of the NGOs in greater detail. This list will be submitted to USAID and a roundtable conducted with the Mission and RFA winners to develop a final list of NGOs with whom the AST plans to work.

7.2. OUTLINE OF TABLES

AST preliminary findings are summarized in three tables. The first lists those NGOs that have demonstrated the potential to be partners as collaborators in Lori or Shirak Marzes or in Yerevan City. The second lists those NGOs that responded and indicated no interest in participation. The third table lists those NGOs that failed to respond either to telephone messages to their place of business or their e-mail addresses.

7.3. HIGHLIGHTS

7.3.1. YEREVAN

PYUNIC Premier NGO involved with the physically disabled. Their work even extends to sending disabled athletes to the Special Olympics.

ASDGHK Disabled Children's Parents Fund (No. 1), active, able and respected by Agencies and Ministries of RA, as well as by International NGOs.

MATERNITY FUND OF ARMENIA (No. 2), most visible in the maternity field. They are well organized. Good working history with most UN agencies.

MISSION ARMENIA (No. 3), probably most active NGO in the social service and humanitarian aid distribution fields. Good reputation.

FUTURE GENERATION UNION (No.4), collaborates well with ministries, universities, and Donors. Quite active.

TATEV Center for Psychological Support and Counseling (No.8), Credible organization in the mental health field. Willing to collaborate in the work of the PHCs.

7.3.2. GYUMRI

MEGHVIK CENTER (No. 15), accepted to be the premier NGO in Gyumri. They have been involved in a variety of projects financed by Int. donors

GUMRI ABAKAH (No. 16), their work seems average, but since there is not much competition, they would be acceptable.

WOMEN FOR DEVELOPMENT (No. 18) , Well educated ladies employed at the Seismic Protection Agency, who have devoted their life to good health for women. They have implemented important projects

7.3.3. VANADZOR

ARAGAST SOCIAL AGENCY (No. 19), Working with disabled children, but could be effective in other areas. Motivated people.

LIGHTSTAR NGO (No. 20) is an upstart but the director is well trained in social work, and is able to gather volunteers easily, which she is in a position to train.

YMCA (No. 21), no particular specialty but solid organization with well prepared volunteer groups

TABLE 1: NGOs WITH PROMISING TRACK RECORD IN SOCIAL SPHERE

List of NGOs to be contacted were taken from “Who is who in Armenian NGOs” (sections: Children, Health, Humanitarian Aid, and Women issues.

| NGO DETAILS | Year | Projects | Size | Donors | Number of people reached | Number of workers used | | Remarks |
|---|--------------|---|---------------------------------------|---|--|-----------------------------------|----------------------------------|---|
| | | | | | | Paid | Volunteers | |
| 1. “ASDGHIK” Disabled Fund Children’s Parents Union <i>(Year founded: 1995)</i> President: Levon Nersisyan Address: Charents St. No.1, 4 th . Floor, Yerevan 375025 Tel: 57-51-85; Fax: 151-119 E-mail: Levast@netsys.am | 1996 to 2001 | Total 13 projects related to disabled children: assistance, care, treatment, training, public education thru town meetings, seminars, conferences, radio, television and printed media. Visits to U.S., France, Switzerland for training staff. | Average of 13 projects: \$9,000 each | OSAF STC UMCOR UNDP UNHCR UNICEF UNWOVAD WB WFP | Total of thirteen projects: 42,000 (however, to be taken into account that probably the beneficiaries are mostly the same in all the projects. | Average of thirteen programs: 3.7 | Average of thirteen programs: 25 | “ASDGHIK” is very experienced in the field of public education. Long experience with the media. It has been involved in development of legislation pertaining to disabled children. They work well with Int. NGOs, Govt. agencies and ministries. Parents of the disabled they serve form the core of their volunteers. |
| 2. Maternity Fund of Armenia <i>(Year founded: 1989)</i> Director: Susanna Aslanyan, David Anhacht No. 23 Yerevan Tel: 24-69-53, 23-12-57 E-mail: anna_can@infocom.am | 1995 to 2001 | Healthcare awareness building, job training for socially unprotected women, Advocacy initiative of changing public policy, psycho-prophylaxis for pregnant women, information campaign for breast feeding | Average of ten projects: \$6,700 each | EQUILIBRES CT UMCOR UNDP UNHCR UNICEF | Total of ten projects: 16,796 | Average of ten projects: 9.8 | Average of ten projects: 17.2 | Leading NGO serving childbearing women. Recognized as such by all UN agencies. Have good monitoring and surveying capability. |

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| NGO DETAILS | Year | Projects | Size | Donors | Number of people reached | Number of workers used | | Remarks |
|--|--------------|---|--|--|---|--------------------------------------|---------------------------------------|---|
| | | | | | | Paid | Volunteers | |
| 3. Mission Armenia <i>(Year founded: 1993)</i> Hripsime Kirakosyan, Pres. Garegin Nzhdeh No. 42, Yerevan, 375007 Tel: 44-47-92, 44-47-93 Fax: 151954 E-mail: ripsik@arminco.com | 1995 to 2001 | In-home care, medical and social services to the non-institutionalized single older persons, public awareness campaign on disability, advocacy campaign on charity and elderly issues, senior citizen centers, soup kitchens. | Average of twenty even projects: \$114,351 | AAA/NGOC ECHO EURASIA EU LIEN TACIS OSI Budapest OXFAM STP/USAID SWISS TUFENKIAN UNHCR WB | Total of twenty seven projects: 120,818 | Average of twenty seven projects: 22 | Average of twenty seven projects: 0 7 | Very capable, good reputation. Regional experience, have excess capacity. All figures reflect the inclusion of an STP contract in the amount of \$1,956,658 from UMCOR affecting 84,000 households (for this assessment figured as 84,000 people). |
| 4. Future Generation Union <i>(Year founded: 1995)</i> Rafael Vardanyan, Pres. M. Baghramian No, 61/7, Yerevan, 375033 Tel: 27-65-19, Fax: 54-40-15 E-mail: futgen@netsys.am | 1995 to 2001 | Health care awareness raising sanitation and hygiene education health info publication, drinking water pipeline, revolving drug fund, help inclusion of vulnerable groups in welfare system, school and health post infrastructure rehabilitation. Summer camping for children. | Average of eighteen projects: \$43,355 | CRS FAR IOM OSI MOSS NOVIB OXFAM UNHCR | Total of eighteen projects: 105,840 | Average of eighteen projects: 11.4 | Average of eighteen projects: 0.20 | Very visible, collaborates with universities and ministries, is one of the founders and a board member of the Consortium of Reproductive Health and Social Welfare. |

TABLE 1: NGOS WITH PROMISING TRACK RECORD IN SOCIAL SPHERE

List of NGOs to be contacted were taken from “Who is who in Armenian NGOs” (sections: Children, Health, Humanitarian Aid, and Women issues.

| NGO DETAILS | Year | Projects | Size | Donors | Number of people reached | Number of workers used | | Remarks |
|--|--------------|--|-------------------------------------|---|---------------------------------|--------------------------------|---------------------------------|---|
| | | | | | | Paid | Volunteers | |
| 5. People For Healthy Lifestyle <i>(Year founded: 1995)</i> Narine Ghazanchyan, Dir Amiryan No. 24, apt. 40, Yerevan Tel: 53-08-54 E-mail: anoushg@hotmail.com ; anahit@netsys.am ; anahit@umcor.am | 1996 to 2001 | Health education thru anti smoking booklet & educational classes to children 10-14, needs assessment, Providing information, education and services on family planning, sexual and reproductive health, advocacy for reproductive health rights, implementation of Heifer livestock project, | Average of nine projects: \$42,431 | ADRA NGOC OXFAM UMCOR UNHCR | Total of nine projects: 56,912 | Average of nine projects: 4.3 | Average of nine projects: 6.8 | Good management, regional activity, capable of public education, partnership and collaboration. |
| 6. Support to Communities <i>(Year founded: 1999)</i> Karen Arakelian, Dir. Toumanian No. 9, Yerevan Tel: 53-58-68; Mobile: 41-30-97 E-mail: stc@netsys.am | 2000 | Provision of safe water, construction, rehabilitation and refurbishment of health facilities, community based insurance, revolving drug fund, supplying essential medicines and equipment to primary health facilities, information gathering, baseline surveys, public education, training burse | Average of three projects: \$80,630 | ECHO UMCOR UNHCR | Total of three projects: 34,590 | Average of three projects: 3.5 | Average of three projects: 0.63 | Support to communities has evolved from Oxfam's public health team in Armenia. Its staff is comprised of former Oxfam staff and community members from the community based PHC program in the Vayotz Dzor Marz. Have experience with setting up primary health centers and training staff. |

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List of NGOs to be contacted were taken from “Who is who in Armenian NGOs” (sections: Children, Health, Humanitarian Aid, and Women issues.

| NGO DETAILS | Year | Projects | Size | Donors | Number of people reached | Number of workers used | | Remarks |
|--|--------------|--|--|--|------------------------------------|--------------------------------|--------------------------------|---|
| | | | | | | Paid | Volunteers | |
| 7. Mental Health Foundation <i>(Year founded: 1996)</i> Dr, Arman Vardanyan, Dir. P.O. BOX 29, Yerevan, 375010 Tel: 54-45-04; Fax: 54-45-04 E-mail: office@mental-health.am | 1999 to 2001 | Psychiatric treatment, care, and rehabilitation of adults and children, psychological support, policy development, primary health care programs, NGO sector development, and public awareness programs. | Average of six projects: \$27,500 | DFID EC HAMLET TR OSI-NY UMCOR | Total of six projects: 2610 | Average of six projects: 4 | Average of six projects: 3 | Have worked in the regions, good public education capability, visible thru the media. |
| 8. “TATEV” Center for Psychological support and counseling <i>(Year founded: 1995)</i> Anahid Tevosyan, Dir. Baghramian No. 2, apt.42, Yerevan, 375019 Tel: 56-23-00, 58-06-56 Fax: 58-06-56 E-mail: atev@freenet.am | 1996 to 2001 | Provide psychosocial services to vulnerable groups with mental health problems, educational programs for doctors, nurses, social workers, teachers and psychologists, information gathering and disseminating. | Average of eight projects: \$8,200 | Largest grant of \$42,500 from INTER-MINDS (UK) Ministry of Education MOSS + SELF GENERATED FUNDS, | Total of eight projects: 15,325 | Average of eight projects: 3.3 | Average of eight projects: 4.8 | Capable of psychiatric assistance to persons with mental health problems within the primary health care system |
| 9. “ZORAVIG” <i>(Year founded: 1988)</i> Anahid Paronian, Director Bakunts 12, IV Nork district, Yerevan Tel: 63-65-67 Email: zoravig@freenet.am | 1999 to 2001 | Health care, education, recreation, culture, humanitarian aid, legal assistance, | N/A | Funds are generated from membership fees, contributions from enterprises, and donations from people in Armenia and Diaspora. | N/A | 2 (total) | 25 (total) | Active in worthwhile projects, with no visible donors, however they claim to have collaborated with: ministries, municipalities in Gyumri and Vanadzor, UN-WFP, UMCOR, Courts of Yerevan, AAA/NGOC, and the Young Lawyer’s Union. |

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List of NGOs to be contacted were taken from “Who is who in Armenian NGOs” (sections: Children, Health, Humanitarian Aid, and Women issues.

| NGO DETAILS | Year | Projects | Size | Donors | Number of people reached | Number of workers used | | Remarks |
|---|--------------|---|-------------------------------------|---|--------------------------------|------------------------|-------------|--|
| | | | | | | Paid | Volunteers | |
| 10. Armenian Women for Health and Healthy Environment <i>(Year founded: 1999)</i> Elena Manvel Ian, Director Saryan 24, apt. 65, Yerevan Tel: 58-50-86, 34-41-82 E-mail: Elena@awhhe.am danelik@freenet.am | 2000 to 2001 | Environment and reproductive health, monitoring management of medical waste disposal, information campaigns | Average of five projects: \$2,850 | IPEN ALTMAN-M.CAPER FOUNDATION, TIDES-FOUNDATION. HCWH-USA | N/A | 1 (total) | 3 (total) | |
| 11. Apaven Int. Charitable Social Organization <i>(Year founded: 1989)</i> Narine Balayan, Director Eznik Kokhbatsy 69, Yerevan 375002 Tel: 53-80-97; Fax: 24-75-42 | 1996 to 2001 | Social programs, financial assistance food, clothes and medicine, medical assistance to orphanages, the elderly and disabled, organize emergency medical aid to metro travelers, some experience in public education. | Average of four projects: \$7,750 | Funds from Italy and Portugal in 1996 & support from local members and private donors | Total of four projects: 15,300 | None | 250 (total) | Director also directs the National Institute of Labor and Social Research of the Ministry of Social Security |
| 12. Women’s Rights Center <i>(Year founded: 1990)</i> Susanna Vardanyan, Dir. Abovian 21, apt. 13, Yerevan Tel: 54-28-28; Fax: 58-28-05 E-mail: wrcarm@arminco.com | 1990 to 2001 | Women’s rights issues, especially anti-spousal abuse, reproductive and sexual life, surveys of violence against women, several publications in Armenian, English and Russian, utilization all aspects of the media for public education including several focus groups. | Information not currently available | “SOCIOMETER” SOCIOLOGICAL INDEPENDENT CENTER IN YEREVAN MINNESOTA HUMAN RIGHTS ADVOCATES | N/A | 6 | 31 | Recently has Received a WINROCK Foundation grant. Could be advisor/councilor to the development of an anti-spousal abuse in coordination with police and social services. |

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List of NGOs to be contacted were taken from “Who is who in Armenian NGOs” (sections: Children, Health, Humanitarian Aid, and Women issues.

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|---|--------------|---|----------------------------------|---|--------------------------|------------------------------|-------------------------------|---|
| | | | | | | Paid | Volunteers | |
| 13. Medical Prevention and Aid Association <i>(Year founded: 1998)</i> Karen Karakyan, Pres. Vartanants 8, room 402, Yerevan Tel: 54-19-41, 54-04-55; 45-19-23, Fax: 45-19-23 Email: root@ami.unet.intar-net.com | 1999 to 2001 | Medical consultation and aid, information and advice on alcohol and drug abuse, health issues and eye examinations. | Minimal | MSF and self generated funds | N/A | None | 8 (volunteer doctors) | The doctors appear to be dedicated to charity. Question is is there a place for volunteer doctors in the PHCCs. |
| 14. “Hippocrat” Free Medical Service <i>(Year Founded: 2000)</i> Levon Gotanchyan, Dir. Yerevan Tel: 52-42-00; Fax: 56-37-91 Email: haskhach@freenet.am | 2000 | Information materials on healthy living, Medical-social mini surveys, medical service and medication to the vulnerable/ | Minimal | Self generated funds. | N/A | None | 2 (volunteer doctors) | Same as #13 |
| 15. Meghvik Center (Gyumri) <i>(Year founded: 1989)</i> Vehanoush Hovanessian, Dir Nizami 52, Gyumri Tel: 041-4-2964; Fax: 041-4-2964 (5) E-mail: meghvik@shirak.am | 1990 to 2001 | Training for sanitary and healthy living, sex education for boys and girls, Bathing facilities, baking dietetic bread for patients with diabetes, renovating a donated building for a social service center, public education campaign for the USAID sponsored voucher system in the earthquake zone. | Average seven projects: \$42,000 | ARMENIA FUND EURASIA FINLAND FUND STC TUFENKIAN FUND UNHCR | 84,000 | Average of seven projects: 4 | Average of seven projects: 45 | The premier NGO in Gyumri. |

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| NGO DETAILS | Year | Projects | Size | Donors | Number of people reached | Number of workers used | | Remarks |
|---|--------------|--|-----------------------------------|--|--------------------------|------------------------|------------|--|
| | | | | | | Paid | Volunteers | |
| 16. Gyumri Abakah (Year founded: 2000) Kakik Adanyan, Director Kordzararain No. 5, Bulvarian Neighborhood, Gyumri Tel: 041-3-1147 (H) Email: avag@shirak.am | 2000 to 2001 | Establishment of a center for education and culture where courses in fourteen disciplines are given. medical service with a therapist, surgeon and dentist | MSF and self generated funds | | | | | |
| 17. YMCA – Ozone (Gyumri) (Year founded: 1992) Khoren Papoyan, Pres. Baruyr Sevag No,11, Gyumri Tel: 041-3-2994 | 1992 to 2001 | Teaching youngsters democracy, motivation, character building, dietary and medical service by a physician. | N/A | CARE DJINISHIAN STC YMCA-USA | NA | 18 (total) | 65 (total) | Operates similar to YMCA –USA, however it is funded primarily by an Armenian family from Rhode Island, |
| 18. Women for Development (Year founded: 1997) Armine Mikayelyan, Dir. V. Sargsyan 5a, Gyumri, 377500 Tel: 041-3-2909, Fax: 041-3- 1580 E-mail: armine@shirak.am | 1997 to 2001 | Raise women’s awareness of contagious diseases, Seismic education for adults and children and teachers, stimulating womed participation in health care issues. | Average of four projects: \$8.364 | GLOBAL FUND FOR WOMN, INST. OF OPEN SOCIETY, USAID UNICEF | N/A | None | na | Good reputation, but their excess capacity must be verified before entrusting them with additional work. |

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List of NGOs to be contacted were taken from “Who is who in Armenian NGOs” (sections: Children, Health, Humanitarian Aid, and Women issues.

| NGO DETAILS | Year | Projects | Size | Donors | Number of people reached | Number of workers used | | Remarks |
|---|--------------|--|---|---|--------------------------|------------------------------|------------|--|
| | | | | | | Paid | Volunteers | |
| 19. Aragast Social Agency Vanadzor <i>(Year founded: 1992)</i> Melania Mirzoyan, Dir. Tigran Medz 36, Vanadzor Tel: 051-23419, 23591, 4-6780 E-mail: beblaze@yahoo.com | 1992 to 2001 | Established rehabilitation center “Arevik” for preparing disabled children to attend regular school. Conferences sponsored by YSU and Frankfurt am Mein University, Training project “Equal opportunities for disabled people. | average OF Three projects: \$8,000 | UMCOR WORLD BANK | N/A | Average of three projects: 3 | na | Dedicated people. Recommended highly. |
| 20. Lightstar NGO (Vanadzor) <i>(Year founded 19 XX)</i> Nune Papayan, Director Tel: 051-23419 50062 (home) | | Collaborates on projects of Aragast (# 19) | Minimal | N/A | N/A | None | 3 | Director is graduate of YSU’s Social Worker training program. In addition, she has made two trips to Germany for training in rehabilitation of invalid children. |
| 21. YMCA (Vanadzor) <i>(Year founded: 19XX)</i> Address: City Playground Tel: 051-44471 | | Teaching young men social ethics, English and computer. Child center for three hours daily for 3 to 7 year olds. Planning a center for retired people | Minimal | Armenian family from Rhode Island. Funds from members and local and diaspora donors. | N/A | 4 | 45 | |

TABLE 1: NGOS WITH PROMISING TRACK RECORD IN SOCIAL SPHERE

List of NGOs to be contacted were taken from “Who is who in Armenian NGOs” (sections: Children, Health, Humanitarian Aid, and Women issues.

| NGO DETAILS | Year | Projects | Size | Donors | Number of people reached | Number of workers used | | Remarks |
|--|--------------|--|--------------------------------------|---|--|-------------------------------|--------------------------------|--|
| | | | | | | Paid | Volunteers | |
| 22. Armenian Relief Society (Year founded: 1991) Nelly Baghdasarian, Dir. Nalbandian St. 116/24 Yerevan 375001 Tel: 56-75-13 Fax: 151-991 E-mail: ars@arminco.com | 1994 to 2001 | Weatherization, knitting project, water project, eye screening, reproductive health and family planning, sustainable agriculture, small business growth, community development, democracy and civil society. | Average of seven projects: \$152,000 | CARE FUJI VISION NCR UMCOR UNHCR USAID WFP WHO | Total of seven projects: 76,000 households | Average of seven projects: 45 | Average of seven projects: 15 | This voluntary women's organization has an extensive network throughout Armenia with 1113 members. They are known to perform quality responsible service to the population. Even though no member is declared as having a position in governing bodies of political parties, the NGO itself is an agency of the Armenian Revolutionary Party. |
| 23. Armenian Association for the disabled “Pyunic” (Year founded: 1989) Hakob Abrahamyan, Pres. Tsitsernakaberd St. 16 Yerevan, 375010 P.O.Box 59 Tel: 56-07-07, Fax: 56-08-17 Email: pyunic@armincao.cam | 1996 to 2001 | Sport rehab project for mentally disabled children, computer training, disabled rights and info center, summer sport rehab camp, silk screening business for the disabled, public education and awareness building, war victim's rehab project, advocacy for proper integration. | Average of eleven projects: \$12,600 | GOA MINISTRY OF YOUTH NGOC OXFAM SCT UNHCR | Average of eleven projects: 130 plus thousands benefiting from advocacy work | Salaried employees: 5 | Average of eleven projects: 14 | Premier NGO involved with the physically disabled. Their work even extends to sending disabled athletes to the Special Olympics. |

Other NGOs were contacted, Some showed no interest at all, and some did not respond. The two groups are listed below.

TABLE 2: THOSE NGOS THAT EXPRESSED “NO INTEREST” IN PADCO TELEPHONE CALLS AND E-MAILS.

Armenian Large Family Shirazi Relief Fund
Armenian Teenagers Cultural Union
Armenian Relief Cross
Armenian “Vahan” Youth Center
Association of Family Planning Services
Bridge and Hope NGO
Charity Union, Arin-Berd
Diabetes Assistance Center
Goy Charitable Fund
Health to your people
Heritage Charity Union
Hope and Help Union
Khatchadur Badalian Children’s Stomatology Ass.
Life Stream Charitable Fund
Vanadzor Women’s Council
Will and Inspiration Union of Handicapped
Work and Charity
Yerevak Charity Fund

TABLE 3: THOSE NGOS THAT DID NOT RESPOND

Armenian Children’s Fund
Bloekomed
Charity for Republic
Healthy Generation
Peace Armenia